PART B - FEE(S) TRANSMITTAL omplete and send his form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents JUL 2 2 2005 🕁 P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (703) 746-4000 INS torsions form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate the correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee publications. maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 24113 04/20/2005 PATTERSON, THUENTE, SKAAR & CHRISTENSEN, P.A. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. 4800 IDS CENTER **80 SOUTH 8TH STREET** MINNEAPOLIS, MN 55402-2100 Brad Pedersen (Depositor's name) 07/25/2005 WASFAW2 00000079 09765766 (Signature 700.00 OP (Date) 02 FC:1504 300.00 DP FC: APPLICATION NO. FILING DATE OF FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/765,766 01/18/2001 Yuefan Deng 2807.04US02 TITLE OF INVENTION: SYSTEM FOR BALANCE DISTRIBUTION OF REQUESTS ACROSS MULTIPLE SERVERS USING DYNAMIC METRICS APPLN, TYPE SMALL ENTITY ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$300 \$1000 07/20/2005 **EXAMINER** ART UNIT **CLASS-SUBCLASS** TRUONG, CAMQUY 2195 718-104000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list 1 Patterson, Thuente, (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, 2 Skaar & Christensen, P.A. (2) the name of a single firm (having as a member a "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) British Virgin Islands Galactic Computing Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): Issue Fee

4a. The following fee(s) are enclosed:

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. 
b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Brad Pedersen

Date 7/20/2005

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